RECEIVED FEC MAIL CENTER

2016 MAR -7 AM 7: 13

Committee Name:
PEOPLES MAJORINY SUPERPAC
If registered, FEC ID:
Today's Date:
02/29/2016
Federal Election Commission 999 E Street, N.W.
Washington, D.C. 20463
Re: Form 1, Statement of Organization—Unlimited Contributions
To Whom It May Concern:
This committee intends to make independent expenditures, and consistent with
the U.S. Court of Appeals for the District of Columbia Circuit decision in

SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:

CAN BELLA

, Treasurer

20-6 · 0M · 07 · 0M · 000M4496

FEC FORM 1

Only

STATEMENT OF **ORGANIZATION**

RECEIVED FEC MAIL CENTER

				201	SARSE-GAILY AH 7: 13
NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
PEOPLES	MAJ	ORITY SU	PERPAC	1111	
			1 1 1 1 1 1 1 1		
ADDRESS (number a	and street)	400 BEAG	H. R.		
(Check if a	address		1 1 1 1 1 1 1 1 1 1 1		
ens is changed		ST. PETE	SBURG	F∠ STATE A	337.911- ZIP CODE ▲
COMMITTEE'S E-MA	AIL ADDRES	s			
(Check if a is changed	address d)	Optional Second E-Mail	Address	OUTLOO	K. COM
COMMITTEE'S WEB (Check if is changed		/ } ` `	MAJORITY SUPE	ERPACO O	7£G
2. DATE 02	2 29	20.1.6			
3. FEC IDENTIFIC	CATION NUI	мвег ▶ С			
4. IS THIS STATEM	MENT X	NEW (N) OF	AMENDED (A)		
I certify that I have e	examined this	s Statement and to the t	pest of my knowledge and belief i	t is true, correct a	nd complete.
Type or Print Name	of Treasurer	CAU BEC	CA		
Signature of Treasure	er	Cu/Bel	la	Date 02	29 2016
NOTE: Submission of			tion may subject the person signing MATION SHOULD BE REPORTED		ne penalties of 52 U.S.C. §30109
Office Use			For further information Federal Election Commiss	contact:	FEC FORM 1 (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

FEC	Form 1 (Revised 02/2009)	Page 2		
	COMMITTEE			
(a)				
(a) [This committee is a principal campaign committee. (Complete the candidate information octow.)			
	b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
Name of Candidat	• • • • • • • • • • • • • • • • • • • •			
Candidat Party Aff		State		
(c) :	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidat				
Party C	ommittee:			
(d) (i		nocratic, ublican, etc.) Party.		
Politica	I Action Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a		
	Corporation Corporation w/o Capital Stock	bor Organization		
	Membership Organization Trade Association Co	poperative		
	In addition, this committee is a Lobbyist/Registrant PAC.			
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	gated fund or party		
•	In addition, this committee is a Lobbyist/Registrant PAC.			
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Joint F	ndraising Representative:			
(g) ;		more political		
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political		
C	ommittees Participating in Joint Fundraiser			
1				
2	FEC ID number			
3	FEC ID number C			
4				

٧	Vrite or Type Committee Name				
— 6.	Name of Any Connected O	rganization, Affiliated Committ	ee, Joint Fundraising Repr	esentative, or Leaders	hip PAC Sponsor
L					
	Mailing Address				
	enter de la companya	CITY		STATE	ZIP CODE
	Relationship: Connected	Organization Affiliated Comm	nittee		
7.	Custodian of Records: Iden books and records.	tify by name, address (phone nu	mber optional) and positi	on of the person in po	ssession of committee
	Full Name CHU	***************************************			
	Mailing Address	400 BEACH	la		
		ST. PETERS 60	CAG	FL 337	01-
	Title or Position	CITY		STATE	ZIP CODE
	MAJORITY 1	FOUNDING PACE	Telephone num	ber	
3.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optic ssistant treasurer).	onal) of the treasurer of the	committee; and the na	me and address of
	Full Name of Treasurer	BELLA	<u> </u>		
	Mailing Address	400 BEACH	Ro		
				<u> </u>	
		ST. PETELS &	464	FC 337	
	Title or Position	CITY		STATE	ZIP CODE
	TREASHLER		Telephone num	ber	

9.

Full Name of Designated Agent	CAH BELLA		1 1 1 1 1 1 1 1 1
Mailing Address	400 BEACH RO	_1_1_1_1_1_1_	
	ST. AETERSBURG	I FL	33701-
TO DOM:	CITY	STATE	ZIP CODE
Title or Position HAJOEI	TOWNSING PARTNER Telep	hone number 12	1-301-6611
	Depositories: List all banks or other depositories in which the exes or maintains funds. Depository, etc.	committee deposits fu	nds, holds accounts, rents
	PNC BANK	i	,
Mailing Address	2498 GILLE TO BAY	164/8	
	<i>,</i>	<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>
	CLEARWATER	I FC	33765-
	CITY	STATE	ZIP CODE
Name of Bank, I	Depository, etc.		
⊶Mailing Address			
Mailing Address		· · · · · · · · · · · · · · · · · · ·	
			
	CITY	STATE	ZIP CODE

MES MASGUN SUBERPROCO WO ETELS 18446, F. 33701

FEBERAL GLEGFOUL C. 999 E STREET R. W.

1/45471/6TON, D.C. 20463

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Federal Election Comm ENVELOPE REPLACEMENT PAGE FOR I The FEC added this page to the end of this filing	INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail Postmarked 3 / 1 / 16	Date of Receipt 3/7/16
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Ne	ext Business Day Delivery
Received from House Records & Registration	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
PREPARER (3/2015)	3/1/16 DATE PREPARED